LINDA LINGLE GOVERNOR



STATE OF HAWAII HAWAII EMPLOYER-UNION HEALTH BENEFITS TRUST FUND

P.O. BOX 2121 HONOLULU, HAWAII 96805-2121 Oahu (808) 586-7390 Toll Free 1 (800) 295-0089 www.eutf.hawaii.gov BOARD OF TRUSTEES
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November 3, 2009

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TO:

Department Heads

Department Personnel Officers

County Personnel Officers Employee Organizations

FROM:

Jim Williams, Administrator

SUBJECT:

EUTF Rates through June 30, 2009

This is to follow up on previous notices regarding actions by the EUTF Board of Trustees to approve benefit plans and rates for the remainder of the plan year from January 1, 2010 through June 30, 2010 for active employees. Attached are rate summaries for the various bargaining units, including separate contribution rates for county employees. These rate summaries have been posted on the EUTF web site and are being distributed at employee benefit fairs.

As previously announced, the EUTF open enrollment period began November 2, 2009 and continues through November 30, 2009. The EUTF has scheduled employee benefit fairs to be held on all major islands until the end of November.

On behalf of the EUTF, thank you for your continued cooperation and support.

c: Board of Trustees

BU7

EMPLOYER/EMPLOYEE CONTRIBUTIONS JANUARY 1, 2010 through JUNE 30, 2010

				Total
Benefit Plan	Type of Enrollment	Employer Contribution	Employee Contribution	Contribution Required
MEDICAL PLANS				
EUTF PPO (HMA) - 90/10 Plan	Self	\$136.80	\$146.56	\$283.36
RSN Chiropractic	Two-Party	\$331.60	\$356.10	\$687.70
non omopracio	Family	\$423.36	\$453.68	\$877.04
EUTF PPO (HMSA) - 80/20 Plan	Self	\$136.80	\$137.36	\$274.16
RSN Chiropractic	Two-Party	\$331.60	\$333.74	\$665.34
	Family	\$423.36	\$425.16	\$848.52
	Self	\$32.42	\$31.44	\$63.86
EUTF Prescription Drug (InformedRx)	Two-Party	\$78.60	\$76.46	\$155.06
	Family	\$100.36	\$97.60	\$197.96
EUTF HMO (HMSA)	Self	\$169.22	\$215.10	\$384.32
Prescription Drug	Two-Party	\$410.20	\$522.64	\$932.84
RSN Chiropractic	Family	\$523.72	\$666.18	\$1,189.90
Kaiser Comprehensive	Self	\$176.58	\$135.36	\$311.94
Prescription Drug	Two-Party	\$410.20	\$346.24	\$756.44
RSN Chiropractic	Family	\$529.58	\$435.86	\$965.44
Kaiser Basic	Self	\$169.22	\$107.04	\$276.26
Prescription Drug	Two-Party	\$410.20	\$259.60	\$669.80
RSN Chiropractic	Family	\$523.72	\$331.20	\$854.92
EUTF Supplemental (HMSA)	Self	\$109.02	\$93.98	\$203.00
informedRx Prescription Drug	Two-Party	\$245.38	\$247.42	\$492.80
RSN Chiropractic	Family	\$327.38	\$301.18	\$628.56
Royal State Supplemental	Self	\$35.06	\$21.56	\$56.62
Prescription Drug	Two-Party	\$86.14	\$53.60	\$139.74
RSN Chiropractic	Family	\$97.82	\$59.58	\$157.40
EUTF High Deductible Health Plan	Self	\$169.22	\$91.10	\$260.32
(HMSA)	Two-Party	\$410.20	\$222.36	\$632.56
Prescription Drug	Family	\$523.72	\$283.70	\$807.42
DENTAL PLAN				
	Self	\$17.06	\$13.72	\$30.78
HDS Dental	Two-Party	\$34.18	\$27.40	\$61.58
	Family	\$70.66	\$30.68	\$101.34
VISION PLAN				
	Self	\$3.64	\$2.40	\$6.04
VSP Vision	Two-Party	\$6.76	\$4.42	\$11.18
	Family	\$8.84	\$5.78	\$14.62
LIFE INSURANCE				
Standard Life Insurance	Employee	\$4.16	\$0.00	\$4.16
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ALL BU'S EXCEPT BU'S 7, 11, AND 12 EMPLOYER/EMPLOYEE CONTRIBUTIONS JANUARY 1, 2010 through JUNE 30, 2010

Benefit Plan	Type of Enrollment	Employer Contribution	Employee Contribution	Total Contribution Required
MEDICAL PLANS				
EUTF PPO (HMA) - 90/10 Plan	Self	\$136.80	\$146.56	\$283.36
RSN Chiropractic	Two-Party	\$331.60	\$356.10	\$687.70
	Family	\$423.36	\$453.68	\$877.04
EUTF PPO (HMSA) - 80/20 Plan	Self	\$136.80	\$137.36	\$274.16
RSN Chiropractic	Two-Party	\$331.60	\$333.74	\$665.34
	Family	\$423.36	\$425.16	\$848.52
	Self	\$32.42	\$31.44	\$63.86
EUTF Prescription Drug (informedRx)	Two-Party	\$78.60	\$76.46	\$155.06
	Family	\$100.36	\$97.60	\$197.96
EUTF HMO (HMSA)	Self	\$169.22	\$215.10	\$384.32
Prescription Drug	Two-Party	\$410.20	\$522.64	\$932.84
RSN Chiropractic	Family	\$523.72	\$666.18	\$1,189.90
Kaiser Comprehensive	Self	\$169.22	\$142.72	\$311.94
Prescription Drug	Two-Party	\$410.20	\$346.24	\$756.44
RSN Chiropractic	Family	\$523.72	\$441.72	\$965.44
Kaiser Basic	Self	\$169.22	\$107.04	\$276.26
Prescription Drug	Two-Party	\$410.20	\$259.60	\$669.80
RSN Chiropractic	Family	\$523.72	\$331.20	\$854.92
EUTF Supplemental (HMSA)	Self	\$101.30	\$101.70	\$203.00
informedRx Prescription Drug	Two-Party	\$245.38	\$247.42	\$492.80
RSN Chiropractic	Family	\$313.48	\$315.08	\$628.56
Royal State Supplemental	Self	\$35.06	\$21.56	\$56.62
Prescription Drug	Two-Party	\$86.14	\$53.60	\$139.74
RSN Chiropractic	Family	\$97.82	\$59.58	\$157.40
EUTF High Deductible Health Plan	Self	\$169.22	\$91.10	\$260.32
(HMSA)	Two-Party	\$410.20	\$222.36	\$632.56
Prescription Drug	Family	\$523.72	\$283.70	\$807.42
DENTAL PLAN				
1100 p	Self	\$17.06	\$13.72	\$30.78
HDS Dental	Two-Party	\$34.18	\$27.40	\$61.58
	Family	\$70.66	\$30.68	\$101.34
VISION PLAN				
	Self	\$3.64	\$2.40	\$6.04
/SP Vision	Two-Party	\$6.76	\$4.42	\$11.18
	Family	\$8.84	\$5.78	\$14.62
LIFE INSURANCE				
Standard Life Insurance	Employee	\$4.16	\$0.00	\$4.16
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BU11

EMPLOYER/EMPLOYEE CONTRIBUTIONS JANUARY 1, 2010 through JUNE 30, 2010

Benefit Plan	Type of Enrollment	Employer Contribution	Employee Contribution	Total Contribution Required
MEDICAL PLANS				
EUTF PPO (HMA) - 90/10 Plan	Self	\$170.86	\$112.50	\$283.36
RSN Chiropractic	Two-Party	\$414.42	\$273.28	\$687.70
	Family	\$528.84	\$348.20	\$877.04
EUTF PPO (HMSA) - 80/20 Plan	Self	\$170.86	\$103.30	\$274.16
RSN Chiropractic	Two-Party	\$414.42	\$250.92	\$665.34
	Family	\$528.84	\$319.68	\$848.52
	Self	\$38.56	\$25.30	\$63.86
EUTF Prescription Drug (informedRx)	Two-Party	\$93.54	\$61.52	\$155.06
	Family	\$119.52	\$78.44	\$197.96
EUTF HMO (HMSA)	Self	\$209.42	\$174.90	\$384.32
Prescription Drug	Two-Party	\$507.96	\$424.88	\$932.84
RSN Chiropractic	Family	\$648.36	\$541.54	\$1,189.90
Kaiser Comprehensive	Self	\$209.42	\$102.52	\$311.94
Prescription Drug	Two-Party	\$507.96	\$248.48	\$756.44
RSN Chiropractic	Family	\$648.36	\$317.08	\$965.44
Kaiser Basic	Self	\$209.42	\$66.84	\$276.26
Prescription Drug	Two-Party	\$507.96	\$161.84	\$669.80
RSN Chiropractic	Family	\$648.36	\$206.56	\$854.92
EUTF Supplemental (HMSA)	Self	\$122.90	\$80.10	\$203.00
informedRx Prescription Drug	Two-Party	\$297.98	\$194.82	\$492.80
RSN Chiropractic	Family	\$380.50	\$248.06	\$628.56
Royal State Supplemental	Self	\$35.06	\$21.56	\$56.62
Prescription Drug	Two-Party	\$86.14	\$53.60	\$139.74
RSN Chiropractic	Family	\$97.82	\$59.58	\$157.40
EUTF High Deductible Health Plan	Self	\$209.42	\$50.90	\$260.32
(HMSA)	Two-Party	\$507.96	\$124.60	\$632.56
Prescription Drug	Family	\$648.36	\$159.06	\$807.42
DENTAL PLAN				
	Self	\$18.58	\$12.20	\$30.78
HDS Dental	Two-Party	\$37.20	\$24.38	\$61.58
	Family	\$76.96	\$24.38	\$101.34
VISION PLAN				
	Self	\$3.64	\$2.40	\$6.04
VSP Vision	Two-Party	\$6.76	\$4.42	\$11.18
	Family	\$8.84	\$5.78	\$14.62
LIFE INSURANCE				
Standard Life Insurance	Employee	\$4.16	\$0.00	\$4.16
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BU12

EMPLOYER/EMPLOYEE CONTRIBUTIONS JANUARY 1, 2010 through JUNE 30, 2010

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Benefit Plan	Type of Enrollment	Employer Contribution	Employee Contribution	Total Contribution Required
MEDICAL PLANS				
EUTF PPO (HMA) - 90/10 Plan	Self	\$152.52	\$100.26	\$252.78
RSN Chiropractic	Two-Party	\$380.92	\$250.96	\$631.88
non omopracie	Family	\$494.12	\$325.04	\$819.16
EUTF PPO (HMSA) - 80/20 Plan	Self	\$152.52	\$92.06	\$244.59
RSN Chiropractic	Two-Party	\$380.92	\$230.42	\$611.34
	Family	\$494.12	\$298.42	\$792.54
	Self	\$26.18	\$17.06	\$43.24
EUTF Prescription Drug (InformedRx)	Two-Party	\$65.36	\$42.74	\$108.10
	Family	\$84.92	\$55.36	\$140.28
EUTF HMO (HMSA)	Self	\$178.70	\$156.82	\$335.52
Prescription Drug	Two-Party	\$446.28	\$392.66	\$838.94
RSN Chiropractic	Family	\$579.04	\$508.76	\$1,087.80
Kaiser Comprehensive	Self	\$178.70	\$78.76	\$257.46
Prescription Drug	Two-Party	\$446.28	\$195.44	\$641.72
RSN Chiropractic	Family	\$579.04	\$252.92	\$831.96
Kaiser Basic	Self	\$178.70	\$49.44	\$228.14
Prescription Drug	Two-Party	\$446.28	\$122.16	\$568.44
RSN Chiropractic	Family	\$579.04	\$157.92	\$736.96
EUTF Supplemental (HMSA)	Self	\$106.46	\$69.14	\$175.60
informedRx Prescription Drug	Two-Party	\$267.00	\$174.16	\$441.16
RSN Chiropractic	Family	\$350.38	\$227.96	\$578.34
Royal State Supplemental	Self	\$35.06	\$21.56	\$56.62
Prescription Drug	Two-Party	\$86.14	\$53.60	\$139.74
RSN Chiropractic	Family	\$97.82	\$59.58	\$157.40
EUTF High Deductible Health Plan	Self	\$178.70	\$100.88	\$279.58
(HMSA)	Two-Party	\$446.28	\$254.30	\$700.58
Prescription Drug	Family	\$579.04	\$331.18	\$910.22
DENTAL PLAN				
	Self	\$18.58	\$12.20	\$30.78
HDS Dental	Two-Party	\$37.20	\$24.38	\$61.58
	Family	\$76.96	\$24.38	\$101.34
VISION PLAN				
/SP Vision	Self	\$3.64	\$2.40	\$6.04
	Two-Party	\$6.76	\$4.42	\$11.18
	Family	\$8.84	\$5.78	\$14.62
LIFE INSURANCE				
Standard Life Insurance	Employee	\$4.16	\$0.00	\$4.16
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BU 1, 2, 3, 4, 9, 10, 13

Non-BU11 and Non-BU12 Excluded, Exempt and EM Employees EMPLOYER/EMPLOYEE CONTRIBUTIONS JANUARY 1, 2010 through JUNE 30, 2010

Benefit Plan	Type of Enrollment	Employer Contribution	Employee Contribution	Total Contribution Required	
MEDICAL PLANS					
EUTF PPO (HMA) - 90/10 Plan	Self	\$170.86	\$112.50	\$283.36	
RSN Chiropractic	Two-Party	\$414.42	\$273.28	\$687.70	
	Family	\$528.84	\$348.20	\$877.04	
EUTF PPO (HMSA) - 80/20 Plan	Self	\$170.86	\$103.30	\$274.16	
RSN Chiropractic	Two-Party	\$414.42	\$250.92	\$665.34	
	Family	\$528.84	\$319.68	\$848.52	
	Self	\$38.56	\$25.30	\$63.86	
EUTF Prescription Drug (InformedRx)	Two-Party	\$93.54	\$61.52	\$155.06	
	Family	\$119.52	\$78.44	\$197.96	
EUTF HMO (HMSA)	Self	\$209.42	\$174.90	\$384.32	
Prescription Drug	Two-Party	\$507.96	\$424.88	\$932.84	
RSN Chiropractic	Family	\$648.36	\$541.54	\$1,189.90	
Kaiser Comprehensive	Self	\$209.42	\$102.52	\$311.94	
Prescription Drug	Two-Party	\$507.96	\$248.48	\$756.44	
RSN Chiropractic	Family	\$648.36	\$317.08	\$965.44	
Kaiser Basic	Self	\$209.42	\$66.84	\$276.26	
Prescription Drug	Two-Party	\$507.96	\$161.84	\$669.80	
RSN Chiropractic	Family	\$648.36	\$206.56	\$854.92	
EUTF Supplemental (HMSA)	Self	\$122.90	\$80.10	\$203.00	
InformedRx Prescription Drug	Two-Party	\$297.98	\$194.82	\$492.80	
RSN Chiropractic	Family	\$380.50	\$248.06	\$628.56	
Royal State Supplemental	Self	\$35.06	\$21.56	\$56.62	
Prescription Drug	Two-Party	\$86.14	\$53.60	\$139.74	
RSN Chiropractic	Family	\$97.82	\$59.58	\$157.40	
EUTF High Deductible Health Plan	Self Ture Ports	\$209.42	\$50.90	\$260.32	
(HMSA)	Two-Party	\$507.96	\$124.60	\$632.56	
Prescription Drug	Family	\$648.36	\$159.06	\$807.42	
DENTAL PLAN	Self	610.50	640.00	400 =0	
HDS Dental	Two-Party	\$18.58	\$12.20	\$30.78	
IIDS Delital	Family	\$37.20 \$76.96	\$24.38 \$24.38	\$61.58	
	i anniy [\$70.30	\$24.30	\$101.34	
VISION PLAN					
VSP Vision	Self	\$3.64	\$2.40	\$6.04	
	Two-Party	\$6.76	\$4.42	\$11.18	
	Family	\$8.84	\$5.78	\$14.62	
LIFE INSURANCE					
Standard Life Insurance	Employee	\$4.16	\$0.00	\$4.16	
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